

REQUEST FOR QUOTATION (THIS IS NOT AN ORDER)			THIS RFQ <input checked="" type="checkbox"/> IS <input type="checkbox"/> IS NOT A SMALL BUSINESS SET-ASIDE			PAGE 1 OF 12 PAGES	
1. REQUEST NO. N00173-05-Q-0009		2. DATE ISSUED 12/02/04		3. REQUISITION/PURCHASE REQUEST NO. 55-9645-05		4. CERT. FOR NAT. DEF. UNDER BDSA REG. 2 AND/OR DMS REG. 1	
5a. ISSUED BY Contracting Officer, NRL, 4555 Overlook Ave SW, Washington DC 20375						6. DELIVER BY (Date) 30 days	
5b. FOR INFORMATION CALL: (NO COLLECT CALLS)						7. DELIVERY <input checked="" type="checkbox"/> FOB DESTINATION <input type="checkbox"/> OTHER (See Schedule)	
NAME Lillian M Moore			TELEPHONE NUMBER			9. DESTINATION	
			AREA CODE 202			NUMBER 767-3320	
8. TO:						a. NAME OF CONSIGNEE Naval Research Laboratory	
a. NAME To all bidders			b. COMPANY			b. STREET ADDRESS 4555 Overlook Ave SW Bldg 49	
c. STREET ADDRESS						c. CITY Washington	
d. CITY			e. STATE		f. ZIP CODE		
			DC		20375		
10. PLEASE FURNISH QUOTATIONS TO THE ISSUING OFFICE IN BLOCK 5a ON OR BEFORE CLOSE OF BUSINESS (Date) 12/13/04			IMPORTANT: This is a request for information, and quotations furnished are not offers. If you are unable to quote, please so indicate on this form and return it to the address in Block 5a. This request does not commit the Government to pay any costs incurred in the preparation of the submission of this quotation or to contract for supplies or service. Supplies are of domestic origin unless otherwise indicated by quoter. Any representations and/or certifications attached to this Request for Quotation must be completed by the quoter.				
11. SCHEDULE (Include applicable Federal, State and local taxes)							
ITEM NO. (a)	SUPPLIES/SERVICES (b)			QUANTITY (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)
	See Attached Continuation Sheet						
12. DISCOUNT FOR PROMPT PAYMENT				a. 10 CALENDAR DAYS (%)	b. 20 CALENDAR DAYS (%)	c. 30 CALENDAR DAYS (%)	d. CALENDAR DAYS
							NUMBER PERCENTAGE
NOTE: Additional provisions and representations <input type="checkbox"/> are <input type="checkbox"/> are not attached.							
13. NAME AND ADDRESS OF QUOTER				14. SIGNATURE OF PERSON AUTHORIZED TO SIGN QUOTATION		15. DATE OF QUOTATION	
a. NAME OF QUOTER							
b. STREET ADDRESS				16. SIGNER			
c. COUNTY				a. NAME (Type or print)		b. TELEPHONE	
						AREA CODE	
d. CITY		e. STATE	f. ZIP CODE	b. TITLE (Type or print)		NUMBER	

STANDARD FORM 36 JULY 1966 GENERAL SERVICES ADMINISTRATION FED. PROC. REG. (41 CFR) 1 - 16.101		CONTINUATION SHEET		REF. NO. DOC. BEING CONT'D N00173-05-Q-0009		PAGE OF 2 12	
To all bidders							
ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT		
0001.	Software Maintenance Online Database Scopus from 01/05 thru 12/05 Please fax quotation to Lillian Moore @ 202-767-1708 or FEDEX to: Naval Research Laboratory, 4555 Overlook Ave SW, Code 3411.C, Washington DC 20375. Note: Any questions concerning this RFQ should be emailed to this account SolQnA@labmis.nrl.navy.mil five (5) days prior to the closing date in Block 10 of this RFQ. Please attach a Published Price List or Cost Breakdown to the Quotation.	1	YR				